

PTO/SB/08A&amp;B (08-03)

Substitute for form 1449A&B/PTO		<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)		Application Number	Unassigned 10/557752
		Filing Date	
		First Named Inventor	Schmalholz, Peter
		Art Unit	Unassigned
		Examiner Name	Unassigned
Sheet 1 of 1	Attorney Docket Number	083041-000000US	

U.S. PATENT DOCUMENTS*					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US-			
		US-			
		US-			
		US-			
		US-			
		US-			

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>2</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
	AA	DE	3920374	A1	01-03-1991	Deriche		<input type="checkbox"/>
	AB	EP	0194524	A2	09-17-1986	Gerhartz		<input type="checkbox"/>
	AC	EP	0561188	A1	09-22-1993	Rehberg		<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>
								<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner Signature	/William E. Dondoro/	Date Considered	12/15/2008
--------------------	----------------------	-----------------	------------

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.